3369W

Wesley A. Bainter

PTO/SB/01 (03-01)
Approved for use through 10/31/2002, OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION FOR UTILITY OR** 

Attorney Docket Number

DESIGN		Filst (vanied invanied)						
PATENT APPLICATION		COMPLETE IF KNOWN						
(37 CFR 1.63)		Application Number	Application Number					
ел <u> </u>		Filing Date						
Submitted OR Su	claration brnitted after Initial	Group Art Unit	367	1				
Will filler (37	Filing (surcharge (37 CFR 1.16 (e)) required)	Examiner Name						
As a below named inventor, I hereby	declare that:		-					
My residence, mailing address, and citi		below next to my name.						
1 believe I am the original, first and sole names are listed below) of the subject TRENCHER	incomber (if only one o	ame is listed helow) or a	in original, first a is sought on the	and joint inventor e <u>invention entitle</u>	(if plura) d:			
	(Title of the	Invention)	-					
the specification of which								
X is attached hereto								
OR		<del></del>						
was filed on (MM/DD/YYYY) as United States Application Number or PCT International								
Application Number and was ame		vended on (MM/DD/YYY	(MM/DD/YYY)		(if applicable).			
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.								
I acknowledge the duty to disclose int in-part applications, material informati PCT international filing date of the co	ntinuation-in-part appli	cation.	22 OI (110 pilo)					
I hereby claim foreign priority benefits or plant breeder's rights certificate(s than the United States of America, patent, inventor's or plant breeder's application on which priority is claime	s under 35 U.S.C. 119 ), or 365(a) of any PC listed below and have rights certificate(s), or	(a)-(d) or (f), or 365(b) (c) international applicat	of any foreign are on which design by checking the application having	g a filing date b	efore that of the			
Prior Foreign Application	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Co	opy Attached?			
Number(s)		Immountill						
			bas OTO	MOSB attached b	ereto:			
Additional foreign application nu	imbers are listed on a :	supplemental priority da	a sneet P10/St	NUZB attached h	AIAID:			

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the Individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/01 (03-01)
Approved for use through 10/31/2002, OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of Information unless it contains a valid OMB control number.

## **DECLARATION** — Utility or Design Patent Application Customer Number Correspondence address below OR Direct all correspondence to: or Bar Code Label Robert O. Blinn Name PO Box 75144 Address ZIP 67275 KS Wichita City Fax 316-729-5918 Telephone 316-773-3270 Country USA I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. A petition has been filed for this unsigned inventor NAME OF SOLE OR FIRST INVENTOR: Family Name Given Name Bainter Wesley Allen Bainter or Surname (first and middle [if\_any]) inventor's Signature Country KS Hoxie State Residence: City PO Box 705 Mailing Address ZIP 67740 USA KS Hoxie Country State A petition has been filed for this unsigned inventor NAME OF SECOND INVENTOR: Family Name Given Name (first and middle [\*\* =nv]) or Surname Inventor's Date / Signature Citizenship Country Residence: City Mailing Address ZIP State Country City

Additional inventors are being named on the

supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Please type a plus sign (+) inside this box

Please type a plus sign (+) inside this			Annwari f	or use through 10/	PTO/SB/81 (0 31/2002, OMB 0551	-0035
Under the Paperwork Reduction Act of 1995.	on parsons are required to rea	U.S. Patent and spond to a collection of	Trademark information	Office; U.S. DEPAF unless it display a	RTMENT OF COMM valid OMB control no	mper.
Under the Paperwork Reduction Act of 1999, 110 parasits and require		Application Num				
		Filing Date				
POWER OF ATTORNEY OR AUTHORIZATION OF AGENT		First Named Inventor		Wesley	A Bainte	r
		Title		Trencher		
		Group Art Unit				
		Examiner Name		, 3369W		
		Attorney Docket Numbe		1 33074		
I hereby appoint:				Piace	Customer	7
	. N		٦		er Bar Code	1 1
Practitioners at Custo	omer Number [			Label		
OR ()	4 h alaur					_ {
x Practitioner(s) named			Registration Number			
	Name		116			Ţ
	774	_	3	6,751		1
Robert O	Robert O Blinn			36,731		
as my/our attorney(s) or ag	ent(s) to prosecute th	e application ide	entified a	bove, and to t	ransact all	1
business in the United State	es Patent and Trader	nark Office cont	nected th	erewith.		
Please change the corresponding The above-mentioned OR Practitioners at Custor OR	Customer Number.			Place Cu	Bar Code	
Firm or Individual Name	Robert O. Blinn					
Address	PO Box 75144					
Address				<u> </u>	<u> </u>	0144
City	Wichita		State 1	(S	Zip 0/2/.	7-0144
	JSA					
Telephone	316-773-3270		Fax 3	16-729-5°	918	
I am the:  Applicant/Inventor.	of the entire interest TOFR 3.73(b) is enc	. See 37 CFR 3.	.71. ro/s <i>B/</i> 96	s).		
Şiatemeni ünder S	SIGNATURE of App					
			igo or ive			
Name Wesley Allen Bainter						
Signature	ZOZI +	72.00	<u> </u>			
Date /2 - NOTE: Signatures of all the Inventor	rs or assignees of record	of the entire interes	t or their re	presentative(s) a	re required. Subm	it multiple
forms if more than one signature is	required, see below*.					
	s are submitted.					

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.